

CONTINUING (1.53(b)) UTILITY PATENT APPLICATION TRANSMITTAL <small>(Only for continuing applications under 37 CFR 1.53(b))</small>	Attorney Docket No. 1075.1117D	
	First Named Inventor: Hiroki OOI, et al.	
	Title:	A POLARIZATION-MODE DISPERSION DETECTING METHOD, AND A DISPERSION COMPENSATION CONTROLLING APPARATUS AND A DISPERSION COMPENSATION CONTROLLING METHOD
	Express Mail Label No.	

APPLICATION ELEMENTS <small>See MPEP chapter 600 concerning utility patent application contents.</small>	ADDRESS TO: Commissioner for Patents Box Patent Application PO Box 1450 Alexandria, VA 22313-1450
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1. <input checked="" type="checkbox"/> Fee Transmittal Form 2. <input checked="" type="checkbox"/> Specification, Claims & Abstract [Total Pages: <u>293</u>] 3. <input type="checkbox"/> Drawing(s) (35 USC 113) [Total Sheets: <u>75</u>] [FIGS. 1-7, 8a-e, 9, 10a-b, 11, 12a-j, 13, 14a-b, 15, 16a-c, 17-24, 25a-c, 26a-g, 27-30, 31a-b, 32-33, 34a-c, 35-43, 44a-b, 45a-b, 46a-b, 47a-b, 48a-b, 49a-b, 50a-b, 51a-b, 52-70, 71a-b, 72a-b, 73-75] 4. <input checked="" type="checkbox"/> Oath or Declaration [Total Pages: <u>4</u>] a. <input type="checkbox"/> Newly executed (original or copy) b. <input checked="" type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) 5. <input type="checkbox"/> This application is filed by fewer than all the inventors named in the prior nonprovisional application. a. <input type="checkbox"/> DELETE the following inventor(s) named in the prior nonprovisional application: b. <input type="checkbox"/> The inventor(s) to be deleted are set forth on a separate sheet attached hereto. 6. <input type="checkbox"/> Verified Statement Claiming Small Entity Status 7. <input checked="" type="checkbox"/> Incorporation by Reference (usable if Box 4b is checked) The entire disclosure of the prior application (identified in Item 21), from which a copy of the oath or declaration is supplied under Box 4b, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein. 8. <input checked="" type="checkbox"/> Applicant claims foreign priority benefit to: <u>Japanese Application 9-328612 filed November 28, 1997</u> 9. <input type="checkbox"/> Application Data Sheet. See 37 C.F.R. 1.76 10. <input type="checkbox"/> CD-Rom or CD-R in duplicate, large table or Computer Program (Appendix) 11. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. <input type="checkbox"/> Computer Readable Form (CRF) b. <input type="checkbox"/> Specification Sequence Listing on: i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input type="checkbox"/> paper c. <input type="checkbox"/> Statement verifying identity of above copies 12. <input checked="" type="checkbox"/> Assignment to Fujitsu Limited of Kawasaki, Japan at Reel 010130, Frame 0360 <input checked="" type="checkbox"/> for publication of assignee information under 37 CFR 1.215(b)	22858 U.S. PTO 10/779797 021804
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ACCOMPANYING APPLICATION PARTS	
13. <input type="checkbox"/> 37 CFR 3.73(b) Statement (when there is an assignee) 14. <input type="checkbox"/> English Translation Document (if applicable) 15. <input checked="" type="checkbox"/> Foreign priority benefit under 35 U.S.C. §119 is claimed. a. <input checked="" type="checkbox"/> Certified Copy of Priority Document(s) filed in prior application No. 09/359,112. b. <input type="checkbox"/> Certified Copy of Priority Document(s) enclosed. c. <input type="checkbox"/> Certified Copy of Priority Document(s) to follow. 16. <input checked="" type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input checked="" type="checkbox"/> Copies of IDS Citations 17. <input type="checkbox"/> Preliminary Amendment a. <input type="checkbox"/> enclosed herewith. b. <input type="checkbox"/> incorporated herein (see Box 21). 18. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized) 19. <input type="checkbox"/> Request and Certification for Nonpublication under 35 U.S.C. 122(b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent 20. <input type="checkbox"/> Other:	<input type="checkbox"/> Power of Attorney

21. CONTINUING APPLICATION, check appropriate box and supply the requisite information below:

☐ Continuation ☒ Divisional ☐ Continuation-in-part (CIP) of prior application No: 09/359,112.

Prior application information: Examiner: Leslie C. Pascal
Group/Art Unit: 2633

Preliminary Amendment:

- ☐ Cancel in this application original claims 1-8, 13, 24, 44, 46 and 51 of the prior application before calculating the filing fee. (At least one original independent claim must be retained for filing purposes.)
- ☐ Amend the specification by inserting before the first line the sentence:

22. NEW CORRESPONDENCE ADDRESS CUSTOMER NO. 21,171



21171

PATENT TRADEMARK OFFICE

23. SIGNATURE OF ATTORNEY OR AGENT

NAME	Christine Joan Gilsdorf	REGISTRATION NO.	43,635
SIGNATURE	<i>C. Joan Gilsdorf</i>	DATE	2/18/04

NEW APPLICATION FEE TRANSMITTAL		Attorney Docket No.	1075.1117D
		Application Number	TBA
		Filing Date	February 18, 2004
AMOUNT ENCLOSED	\$ 2212.00	First Named Inventor	Hiroki OOI, et al.

FEE CALCULATION (fees effective 10/01/01)					
CLAIMS	(1) FOR	(2) NUMBER FILED	(3) NUMBER EXTRA	(4) RATE	(5) CALCULATIONS
	TOTAL CLAIMS	38 - 20 =	18	X \$ 18.00 =	\$ 324.00
	INDEPENDENT CLAIMS	16 - 3 =	13	X \$ 86.00 =	1118.00
	MULTIPLE DEPENDENT CLAIMS (any number; if applicable)			+ \$290.00 =	
	BASIC FILING FEE				770.00
	Total of above				\$ 2212.00
	Calculations =				
	Surcharge for late filing fee, Oath or Declaration (37 CFR 1.53(f)) (\$130.00)				
	Reduction by 50% for filing by small entity (37 CFR 1.27).				
	TOTAL FILING FEE =				\$ 2212.00
	Surcharge for filing non-English language application (\$130.00; 37 CFR 1.52(d))				
	Recordation of Assignment (\$40.00; 37 CFR 1.21(h))				
	TOTAL FEES DUE =				\$ 2212.00

METHOD OF PAYMENT	
<input checked="" type="checkbox"/>	Check enclosed as payment.
<input type="checkbox"/>	Charge "TOTAL FEES DUE" to the Deposit Account No. below.
<input type="checkbox"/>	No payment is enclosed and no charges to the Deposit Account are authorized at this time (unless specifically required to obtain a filing date).

GENERAL AUTHORIZATION					
<input checked="" type="checkbox"/>	If the above-noted "AMOUNT ENCLOSED" is not correct, the Commissioner is hereby authorized to credit any overpayment or charge any additional fees necessary to: <table border="1" data-bbox="289 1136 909 1260"><tr><td>Deposit Account No.</td><td>19-3935</td></tr><tr><td>Deposit Account Name</td><td>STAAS & HALSEY LLP</td></tr></table>	Deposit Account No.	19-3935	Deposit Account Name	STAAS & HALSEY LLP
Deposit Account No.	19-3935				
Deposit Account Name	STAAS & HALSEY LLP				
<input checked="" type="checkbox"/>	The Commissioner is also authorized to credit any overpayments or charge any additional fees required under 37 CFR 1.16 (filing fees) or 37 CFR 1.17 (processing fees) during the prosecution of this application, including any related application(s) claiming benefit hereof pursuant to 35 USC 120 (e.g., continuations/divisionals/CIPs under 37 CFR 1.53(b) and/or continuations/divisionals/CPAs under 37 CFR 1.53(d)) to maintain pendency hereof or of any such related application.				

SUBMITTED BY: STAAS & HALSEY LLP			
Typed Name	Christine Joan Gilsdorf	Reg. No.	43,635
Signature	<i>C. Joan Gilsdorf</i>	Date	2/18/04